

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

Reset Form

<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	11069
Logged In	AM
Scanned	
Computer	AM
Audited	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Committee to Reelect Margaret Borgen

**IMPORTANT:** Indicate by # type of committee you are reporting for: 7

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other  
Political Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political  
Subdivision PAC ( 11 ) Local Ballot Issue

## CANDIDATE COMMITTEES ONLY:

Candidate Name

Margaret Borgen

Political Party (if applicable)

Office Sought

School Board

District (if Senate or House)

**SIGNATURE OF PERSON FILING REPORT**

Robyn H. Mahaffey

**TELEPHONE**

515-266-6825

**DATE SIGNED**

9-7-05

Late reports are subject to possible civil and criminal penalties.

I AM FILING A 09-08-05 REPORT FOR (1) **ELECTION** / (2) **NON-ELECTION YEAR**.  
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

SEPT 13, 2005

County & Local Committees, enter County in which Election is held

## STATEMENT OF CASH ON HAND

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 33.08

### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

12,490.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL** .....

\$ 12,523.08

### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

5,271.83

Schedule F: Loan Repayments total (Attach Schedule F)

0

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

\$ 7,251.25

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

0

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

0

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

0

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES ☒ NO

### CANDIDATE COMMITTEES ONLY:

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$

0

For Instructions, See Back of Form

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Re-elect Margaret Borgen

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/23/05	ID# CK# 8844	Caroline Levine 2410 Terrace Rd DSM 50312		\$ 50.00	<input type="checkbox"/>
8/13/05	ID# CK# 1074	Curtis Stamp 300 Walnut St #806 DSM 50309		50.00	<input checked="" type="checkbox"/>
8/22/05	ID# CK# 1017	Joann McKay 1514 E Jefferson Ave DSM 50316		75.00	<input checked="" type="checkbox"/>
8/23/05	ID# CK# 5283	Ruthanne Harstad 441 Boyd DSM 50317		100.00	<input checked="" type="checkbox"/>
8/23/05	ID# CK# 4434	Connie Wimer 100 4th St DSM 50309		100.00	<input checked="" type="checkbox"/>
8/23/05	ID# CK# 522	Caroline W. Levine DSM		100.00	<input checked="" type="checkbox"/>
8/23/05	ID# CK# 9258	Alicia Claypool 5754 Crallery Ct. W DSM 50266		100.00	<input checked="" type="checkbox"/>
8/23/05	ID# CK# 3555	Andrea McGuire 100 37th St DSM 50312		100.00	<input checked="" type="checkbox"/>
8/16/05	ID# CK# 8725	Robert A Barnett 2942 Sioux Ct. DSM 50321		100.00	<input checked="" type="checkbox"/>
8/22/05	ID# CK# 11454	Georgia Helmick 300 Walnut #75 DSM 50309		100.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 875.00	
TOTAL (if last page of this schedule)				\$	

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(Including candidate's personal funds)

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COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Reelect Margaret Bergen

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8/23/05	ID# CK# 4922	Monica Fischer 1407 41st St DSM 50311		\$ 200.00	<input checked="" type="checkbox"/>
8/23/05	ID# CK# 13175	David Hurd Revocable Trust 300 Walnut St. DSM 50311		250.00	<input checked="" type="checkbox"/>
8/23/05	ID# CK# 4568	Rich Eychaner 70304 1797 DSM 50306		250.00	<input checked="" type="checkbox"/>
8/22/05	ID# CK# 12970	Frederick Weitz 1245 Brown Woods Dr W DSM 50265		250.00	<input checked="" type="checkbox"/>
8/5/05	ID# CK# 7141	Frances Fleck 2304 Ridgewood Dr W DSM 50265		50.00	<input type="checkbox"/>
8/8/05	ID# CK# 5836	Marsha Duke 515 Glenview Dr DSM 50317		50.00	<input type="checkbox"/>
8/11/05	ID# CK# 6164	Gloria Cano 605 SE Rose DSM 50315		25.00	<input type="checkbox"/>
8/10/05	ID# CK# 1746	Paul Linn 1120 Briar Ridge W DSM 50265		25.00	<input type="checkbox"/>
8/20/05	ID# CK# 11885	James E. Wise 4501 Adams DSM 50310		25.00	<input type="checkbox"/>
8/17/05	ID# CK# 5473	Jean Ann Basinger 1335 48th St DSM 50311		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1175.00	
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
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8/13/05	ID# CK# 8974	Jerry Wadden 3401 SW 33rd St. DSM 50321		\$ 50.00	<input type="checkbox"/>
8/9/05	ID# CK# 2051	Janet Petersen 4300 Beaver Hills Dr DSM 50310		50.00	<input type="checkbox"/>
8/25/05	ID# CK# 3173	Paulee Lipsman 2880 Grand Ave #106 DSM 50312		100.00	<input type="checkbox"/>
8/26/05	ID# CK# 3741	Robert Brammer 1717 Mar Ella Trail DSM 50310		25.00	<input type="checkbox"/>
8/25/05	ID# CK# 1257	Sheldon Robinowitz 1 SW 51st St. DSM 50312		50.00	<input type="checkbox"/>
8/24/05	ID# CK# 4934	Lisa Nakashima 1514 47th St DSM 50311		50.00	<input type="checkbox"/>
8/25/05	ID# CK# 4995	Weldon D. Gourd 1900 Searle St DSM 50317		25.00	<input type="checkbox"/>
8/24/05	ID# CK# 5542	Marguerite Van Ginkel Bossert 3720 Oneida Point DSM 50321		35.00	<input type="checkbox"/>
8/26/05	ID# CK# 1430	Melissa Nelson 4333 University Ave DSM 50311		50.00	<input type="checkbox"/>
8/25/05	ID# CK# 2966	Jane Bishop Fogg 13360 Ashleaf Dr Clive, IA 50325		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 485.00	
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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*Committee to Reelect Margaret Borgen*

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8/25/05	ID# CK# 8782	Carolyn Nelson 675 48th DSM 50312		\$ 25.00	<input type="checkbox"/>
8/24/05	ID# CK# 9194	Harriet S. Macomber 630 41st St DSM 50312		25.00	<input type="checkbox"/>
8/24/05	ID# CK# 4945	Florence Buhr 4147 30th St. DSM 50310		25.00	<input type="checkbox"/>
8/24/05	ID# CK# 11615	Diane Morain 3740 River Oaks Dr DSM 50312		100.00	<input type="checkbox"/>
8/25/05	ID# CK# 5502	Evelyn Wiley 600 E 5th St DSM 50309		10.00	<input type="checkbox"/>
8/25/05	ID# CK# 1072	Michele Soria 4406 Bel aire Rd. DSM 50310		25.00	<input type="checkbox"/>
8/24/05	ID# CK# 2150	Bonnie Campbell 3131 Fleur Dr Apt 702 DSM 50321		250.00	<input type="checkbox"/>
8/23/05	ID# CK# 7160	Sam Kalainov 681 50th St DSM 50312		200.00	<input type="checkbox"/>
8/23/05	ID# CK# 8084	Phyllis Krumrey 3407 Kinsey DSM 50317		25.00	<input type="checkbox"/>
8/24/05	ID# CK# 6504	Alan Zuckert 1515 Linden St DSM 50309		250.00	<input type="checkbox"/>
SUB-TOTAL				\$ 935.00	
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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8/7/05	ID# CK# 4075	Mary Wolf 525 Country Club DSM 50312		\$ 50.00	<input type="checkbox"/>
8/24/05	ID# CK# 4100	Roger Hudson 3919 Hillcrest Dr 50310 50310		25.00	<input type="checkbox"/>
8/22/05	ID# CK# 3160	Barbara Anderson 1224 37th St DSM 50311		25.00	<input type="checkbox"/>
8/24/05	ID# CK# 7255	Marian Johnson 4063 47th St DSM 50310		10.00	<input type="checkbox"/>
8/19/05	ID# CK# 1549	Ellen Taylor 680 Harwood Dr DSM 50312		50.00	<input type="checkbox"/>
8/20/05	ID# CK# 3180	Elaine Symonial 2116 44th St DSM 50310		25.00	<input type="checkbox"/>
8/16/05	ID# CK# 6115	Sam Haugland 6750 School St #1402 DSM 50311		250.00	<input type="checkbox"/>
8/18/05	ID# CK# 5114	Mark Engelbrecht 3930 Grand Ave DSM 50312		100.00	<input type="checkbox"/>
8/18/05	ID# CK# 8742	Susan Kelley 14 Glenview Dr DSM 50312		50.00	<input type="checkbox"/>
8/22/05	ID# CK# 1284	Doris J. Newlin 3315 48th Pl DSM 50310		250.00	<input type="checkbox"/>
SUB-TOTAL				\$ 835.00	
TOTAL (if last page of this schedule)				\$	

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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8/15/05	ID# CK# 1816	Arnold Levine 1701 E. Euclid DSM 50316		\$ 50.00	<input type="checkbox"/>
8/11/05	ID# CK# 1960	Joan Christ 3550 Lincoln Pl Dr DSM 50312		100.00	<input type="checkbox"/>
8/14/05	ID# CK# 10669	Robert E. Jester 4201 Timberwood Dr WDSM 50265		250.00	<input type="checkbox"/>
8/16/05	ID# CK# 6980	Harlan Hockenberg 801 Grand Ave DSM 50309		50.00	<input type="checkbox"/>
8/1/05	ID# CK# 12011	Richard Peters 2571 Grathrie #308 DSM 50317		100.00	<input type="checkbox"/>
8/1/05	ID# CK# 1028	Dawn Taylor 31 52nd DSM 50312		100.00	<input type="checkbox"/>
8/4/05	ID# CK# 1480	Robert Gernes 1011 45th St DSM 50311		50.00	<input type="checkbox"/>
8/1/05	ID# CK# 13964	Margaret Swanson 1624 Pennsylvania DSM 50316		100.00	<input type="checkbox"/>
7/31/05	ID# CK# 12318	James Autry 5007 Woodland DSM 50312		100.00	<input type="checkbox"/>
7/25/05	ID# CK# 1042	Polly Clark 101 Lincoln Pl Dr DSM 50317		150.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 1050.00

TOTAL (if last page of this schedule)

\$

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS



CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Reelect Margaret Borgen

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7/26/05	ID# CK# 8383	Sandra O'Brien 6826 Del Matro DSM 50311		\$ 20.00	<input checked="" type="checkbox"/>
7/30/05	ID# CK# 1496	Marilyn Farr 740 16th St DSM 50314		20.00	<input checked="" type="checkbox"/>
8/5/05	ID# CK# 8624	Mary Chapman 3727 Skylene Dr DSM 50310		50.00	<input checked="" type="checkbox"/>
8/1/05	ID# CK# 2140	Gladys Bloodworth 3524 Grand Ave DSM 50312		25.00	<input checked="" type="checkbox"/>
8/2/05	ID# CK# 4814	Charlotte Nelson 1141 Cummins Circle DSM 50311		25.00	<input checked="" type="checkbox"/>
7/30/05	ID# CK# 3822	Miriam Jacobs 13731 Hickman Urbandale 50323		25.00	<input checked="" type="checkbox"/>
8/1/05	ID# CK# 4098	Jacqueline Devine 3004 45th St DSM 50310		25.00	<input checked="" type="checkbox"/>
8/1/05	ID# CK# 4179	Amy Mills 1081 44th St DSM 50311		25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# Cash	Barbara Tapscott 405 51st St DSM 50312		30.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# Cash	Marilyn Reese 3667 Grand #8 DSM 50312		30.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$275.00

TOTAL (if last page of this schedule)

\$

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
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7/28/05	ID# CK# <i>Cash</i>	<i>Scash Donors 2002 ea DSM</i>		\$ <i>100.00</i>	<input checked="" type="checkbox"/>
7/25/05	ID# CK# <i>7319</i>	<i>Mary Lynch 3520 Grand Ave DSM 50312</i>		<i>100.00</i>	<input checked="" type="checkbox"/>
7/28/05	ID# CK# <i>2489</i>	<i>Karin Heilman 1318 39th St DSM 50311</i>		<i>100.00</i>	<input checked="" type="checkbox"/>
7/28/05	ID# CK# <i>3658</i>	<i>Douglas Lewis 52 30th St DSM 50312</i>		<i>100.00</i>	<input checked="" type="checkbox"/>
7/28/05	ID# CK# <i>3325</i>	<i>Patsy Shors 100 Market St #508 DSM 50309</i>		<i>100.00</i>	<input checked="" type="checkbox"/>
7/28/05	ID# CK# <i>21975</i>	<i>Lyle Simpson 3131 Fleur Dr #907 DSM 50321</i>		<i>100.00</i>	<input checked="" type="checkbox"/>
7/28/05	ID# CK# <i>5199</i>	<i>Mathew McCoy 5016 Pleasant St DSM 50312</i>		<i>100.00</i>	<input checked="" type="checkbox"/>
7/28/05	ID# CK# <i>1616</i>	<i>Jane Hein 3819 Thurntm Ave DSM 50321</i>		<i>100.00</i>	<input checked="" type="checkbox"/>
7/27/05	ID# CK# <i>2020</i>	<i>Gloria Hoffmann 4200 Leonard Pl. DSM 50310</i>		<i>100.00</i>	<input checked="" type="checkbox"/>
7/28/05	ID# CK# <i>6268</i>	<i>Jeresa Bauslian 2804 44th St DSM 50310</i>		<i>100.00</i>	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ <i>1,000.00</i>	
TOTAL (if last page of this schedule)				\$	

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Reelect Margaret Borgen

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
7/21/05	ID# CK# 1697	Mark Schuling 500 Glenview Dr DSM 50312		\$ 100.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 3144	Joanne Oldson 418 38th Pl DSM 50312		100.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 3921	David Oman 743 53rd DSM 50312		100.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 4500	D.L. Briles 3501 SW 33rd St DSM 50321		100.00	<input checked="" type="checkbox"/>
7/21/05	ID# CK# 1455	Susan Skinner 1524 41st St PL DSM 50311		100.00	<input checked="" type="checkbox"/>
7/24/05	ID# CK# 12320	James O'Halloran 3303 Beaver Ave DSM 50310		100.00	<input checked="" type="checkbox"/>
7/25/05	ID# CK# 5466	Joy Corning 4323 Grand Ave #324		100.00	<input checked="" type="checkbox"/>
7/25/05	ID# CK# 12396	John Cortesio Jr 5828 Waterbury DSM 50312		100.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 8804	Caroline Levine 2410 Terrace Rd DSM 50312		50.00	<input checked="" type="checkbox"/>
7/31/05	ID# CK#	Patricia Daniels 1345 Burlington Terrace DSM 50314		50.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 900.00	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Reelect Margaret Borgen

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
7/25/05	ID# CK# 2192	Pamela Bass Bookey 115W 51st St Dsm 50312		\$ 50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 11935	Billie Ray 114 SW 51st St Dsm 50312		50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 2410	A Joyce Smith 3811 SW 28th DSM 50321		50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 1177	Diane Krell 1620 S. 43rd St w Dsm 50265		50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 5080	Vilay Naayen 2402 Welbeck Rd DSM 50310		50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 1862	Robert Wheeler 214 E Kirkwood DSM 50315		50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 12163	James Erickson 3818 Thornton Ave DSM 50321		50.00	<input checked="" type="checkbox"/>
7/27/05	ID# CK# 7526	Joanne Mahaffey 2220 E 32nd St Dsm 50317		50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 2345	Diana Deibler 1398 South Shore Dr Clive. 50325		50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 3442	Susan Vande Haar 1427 Germania Dr DSM 50311		50.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 500.00	
TOTAL (if last page of this schedule)				\$	

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev 07/03)

MONETARY  
RECEIPTS



CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Reelect Margaret Borgen

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/28/05	ID# CK# 1495	Somphong Daccam 4607 SE 27th St DSM 50320		\$ 50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 3064	Robin Heinemann 669 20th St DSM 50314		50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 1582	Christine Hensley 753 55th St DSM 50312		50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 5377	Matthew Carpenter 1431 Frazier DSM 50315		50.00	<input checked="" type="checkbox"/>
7/17/05	ID# CK# 3327	Ruth Ann Petrak 1507 Pennsylvania Ave DSM 50316		50.00	<input type="checkbox"/>
7/28/05	ID# CK# 3108	Scarlett Lunning Huey 2515 39th St DSM 50310		50.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 5971	Margaret Stoffregen 4150 Greenwood Dr DSM 50312		25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 2185	William Sherman 3928 Twana Dr DSM 50310		25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 1050	James Bowman 3663 Grand Ave DSM 50312		25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 6514	Kathleen Clark 2006 35th St DSM 50310		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 400.00	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

*Committee to Re-elect Margaret Bergen*

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
7/28/05	ID# CK# 8033	Mark Reed 2808 Guthrie Ave Dsm 50317		\$ 25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 2820	Kumban Song 2345 Park Ave Dsm 50321		25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 3475	Mary Campos 203 E 16th St Dsm 50316		25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 1108	Heather Matson 3000 Grand Ave #314 Dsm 50312		25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 1964	Mark Schudling 500 Glenview Dr Dsm 50312		25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 5291	Dale Hyman 1327 46th St Dsm 50311		25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 6158	Mary Tabor 110 Lincoln Pl Dr Dsm 50312		25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 5988	Eloise Cranke 2222 E. 41st St Dsm 50317		25.00	<input checked="" type="checkbox"/>
7/26/05	ID# CK# 4384	Martha Hill Silvestro 310 56th St Dsm 50312		25.00	<input checked="" type="checkbox"/>
7/25/05	ID# CK# 8169	Vera M Easter 4115 15th St Dsm 50310		25.00	<input type="checkbox"/>

SUB-TOTAL

\$ 250.00

TOTAL (if last page of this schedule)

\$

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Reelect Margaret Borgen

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
7/28/05	ID# CK# 2546	Chester Guinn 1041 8th St DSM 50314		\$ 25.00	<input checked="" type="checkbox"/>
7/28/05	ID# CK# 8038	Mary D Conlow 4801 Observatory Rd DSM 50311		25.00	<input checked="" type="checkbox"/>
8/29/05	ID# CK# 3035	Becky Miles Polka 3525 Whitmer Pky DSM 50310		50.00	<input type="checkbox"/>
8/28/05	ID# CK# 6982	Diane Glass 1897 Scotch Ridge Rd Carlisle 50047		100.00	<input type="checkbox"/>
8/29/05	ID# CK# 105	Doyle Monsma 3013 Druid Hill Dr DSM 50315		100.00	<input type="checkbox"/>
8/29/05	ID# CK# 6328	Thorald Davidson 100 Northwood Dr DSM 50312		50.00	<input type="checkbox"/>
8/23/05	ID# CK# 5101	Robert Riley 3121 Dean DSM 50317		75.00	<input type="checkbox"/>
8/27/05	ID# CK# 3968	Patricia Cale Finnegan 1441 46th St DSM 50311		25.00	<input type="checkbox"/>
8/26/05	ID# CK# 3301	Johnny Danos 3315 Southern Hills Dr DSM 50321		100.00	<input type="checkbox"/>
8/26/05	ID# CK# 4711	Harriet Bailey 863 34th DSM 50312		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 575.00	
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

*Committee to Reelect Margaret Bergen*

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
8/25/05	ID# CK# 7772	Ruth Biddle 237 Park Place DSM 50312		\$ 25.00	<input type="checkbox"/>
9/1/05	ID# CK# 1606	Eloise Cram 3100 Grand Ave #2F DSM 50312		25.00	<input type="checkbox"/>
9/1/05	ID# CK# 3527	John Watson 3524 Grand Ave #508 DSM 50312		100.00	<input type="checkbox"/>
9/1/05	ID# CK# 9531	Wanda Everage 513 NE 9th St Ankeny 50021		35.00	<input type="checkbox"/>
8/28/05	ID# CK# 5421	Mary Kelly 314 43rd St DSM 50312		100.00	<input type="checkbox"/>
8/30/05	ID# CK# 3775	Suzanne Blouin 300 Walnut St #12 DSM 50309		50.00	<input type="checkbox"/>
8/30/05	ID# CK# 6580	Paul Calkins 3319 SW 34th St DSM 50321		25.00	<input type="checkbox"/>
8/25/05	ID# CK# 2118	Harold Belken 416 SE Gray St. DSM 50315		100.00	<input type="checkbox"/>
8/24/05	ID# CK# 2264	Judy Davis 2830 Grand #304 DSM 50312		25.00	<input type="checkbox"/>
8/28/05	ID# CK# 9639	Mary Gordon 219 42nd St DSM 50312		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 585.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Reelect Margaret Borgen

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
8/26/05	ID# CK# 7257	Avon Crawford 5108 Westwood Dr W DSM 50265		\$ 100.00	<input type="checkbox"/>
9/3/05	ID# CK# 11443	Jennifer Johnson 3314 Southern Hills Dr DSM 50321		25.00	<input type="checkbox"/>
8/31/05	ID# CK# 7982	Andrew Holveck 2007 47th St DSM 50310		25.00	<input type="checkbox"/>
8/25/05	ID# CK# 1861	Terry Crilland 6100 Thornton Ave DSM 50321		100.00	<input type="checkbox"/>
8/22/05	ID# CK# 7047	Michael Cunningham 1347 44th St DSM 50311		100.00	<input type="checkbox"/>
8/16/05	ID# CK# 2070	Caral A Faber 1713 Thornwood Rd W DSM 50265		100.00	<input type="checkbox"/>
8/16/05	ID# CK# 3226	Mark Hasek 1313 7th Ave Altona 50009		100.00	<input type="checkbox"/>
8/24/05	ID# CK# 3011	Mark Kennedy 1428 Germania Dr DSM 50311		50.00	<input type="checkbox"/>
8/24/05	ID# CK# 3887	Michael Tousley 421 S 49th St. W DSM 50265		100.00	<input type="checkbox"/>
8/18/05	ID# CK# 5013	Leon Shearer 421 Silverado Trl Waukee 50263		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 800.00	
TOTAL (if last page of this schedule)				\$	

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Re elect Margaret Borgen

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
8/22/05	ID# CK# 2877	Joseph Proctor 108 30th St DSM 50312		\$ 100.00	<input type="checkbox"/>
9/1/05	ID# 6232 CK# 2959	Master Builders of IA PAC 221 Park St DSM 50303		1,500.00	<input type="checkbox"/>
8/16/05	ID# CK# 3058	Steve Ferguson 12640 NW 85th Ave Crimes 50111		100.00	<input type="checkbox"/>
8/26/05	ID# CK# 2097	Richard Felice 3101 SW 32nd Pl DSM 50321		100.00	<input type="checkbox"/>
8/24/05	ID# CK# 1509	James Johnson 3228 Sicily line Dr DSM 50310		50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1,850.00

TOTAL (if last page of this schedule)

\$ 12,490.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

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# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Reelect Margaret Borgen

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/28/05	ID# CK# 1013	Borgen Systems 1901 Bell Ave. DSM 50315	Clerical Work (5hr)	\$ 65.00
8/28/05	ID# CK# 1014	Avon Crawford 5108 Westwood Dr WDSM 50265	Postage mailing	185.00
9/1/05	ID# CK# 1015	U.S. Post Office DSM	Postage - mail cards	2,200.00
9/3/05	ID# CK# 1016	Borgen Merchandising Sys 1901 Bell Ave DSM 50315	Post Cards	111.09
9/4/05	ID# CK# 1017	Carter Printing 1739 E Grand DSM 50316	3 sets postcards	2,680.74
9/4/05	ID# CK# 1018	Anderson Erickson Dairy 2420 E. University DSM 50317	Ice Cream - Fund Raiser	30.00
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 5271.83
TOTAL (if last page of this schedule)				\$ 5,271.83

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)